



STATE OF WASHINGTON  
DEPARTMENT OF HEALTH

October 6, 2014

CERTIFIED MAIL # 7011 1570 0002 7808 8287

Constance Kanter, CFO & VP  
Seattle University  
901- 12<sup>th</sup> Avenue  
Seattle, Washington 98122

RE: CN14-27

Dear Ms. Kanter:

Enclosed is Certificate of Need #1534 issued to construct a 36-bed Medicare and Medicaid certified skilled nursing facility in King County, within Washington State.

The certificate is not approval for any other local, federal, or state statutes, rules, or regulations. Such a project may also need Department of Health approval for a construction plan and facility licensing or certification, as well as other federal or local jurisdiction permits.

The Certificate of Need is valid for two years. The project must begin during this time. If there is substantial and continuing progress, we may extend the certificate for one six month period. For an extension, you must submit an extension request at least 120 days before the expiration. You cannot begin a project after the expiration date.

This decision may be appealed. The appeal options are listed below.

Appeal Option 1:

Any person with standing may request a public hearing to reconsider this decision. The request must state the specific reasons for reconsideration in accordance with Washington Administrative Code 246-310-560. A reconsideration request must be received within 28 calendar days from the date of the decision at one of the following addresses:

Mailing Address:  
Department of Health  
Certificate of Need Program  
Mail Stop 47852  
Olympia, WA 98504-7852

Physical Address:  
Department of Health  
Certificate of Need Program  
111 Israel Road SE  
Tumwater, WA 98501



Appeal Option 2:

Any person with standing may request an adjudicative proceeding to contest this decision within 28 calendar days from the date of this letter. The notice of appeal must be filed according to the provisions of Revised Code of Washington 34.05 and Washington Administrative Code 246-310-610. A request for an adjudicative proceeding must be received within the 28 days at one of the following addresses:

Mailing Address:

Adjudicative Service Unit  
Mail Stop 47879  
Olympia, WA 98504-7879

Physical Address:

Adjudicative Service Unit  
111 Israel Road SE  
Tumwater, WA 98501

We monitor projects until completed or the expiration date, whichever occurs last. We do this with quarterly progress reports. At least 30 days before the report's due date, you will receive a form to complete and return.

If you have any questions, please contact Janis Sigman, Manager of the Certificate of Need Program at (360) 236-2955.

Sincerely,



Steven M. Saxe, FACHE  
Director, Office of Community Health Systems

Enclosure

cc: Department of Health, Office of Investigations and Inspections  
Department of Health, Construction Review Services  
Department of Health, Office of Customer Service



This Certificate is granted under the authority of RCW 70.38. Issuance of this Certificate does not constitute approval under any other local, federal or state statute, implementing rules and regulations. Examples where additional approval may be necessary include, but are not limited to, construction plan approval through the Construction Review Unit of the Department of Health, facility licensing/certification through the Department of Social and Health Services or Department of Health, and other federal or local jurisdiction permits.

**Certificate of Need #1534 is issued to:**

**Legal Name of Applicant:** Seattle University  
**Address of Applicant:** 901 12<sup>th</sup> Avenue, Seattle, Washington 98122  
**Type of Service:** Skilled Nursing Facility  
**Facility Name:** Wesley Homes Lea Hill Health Center  
**Facility Address:** 32049 109<sup>th</sup> Place SE, Auburn, WA 98092

**ISSUANCE OF THIS CERTIFICATE OF NEED IS BASED ON THE DEPARTMENT'S RECORD AND EVALUATION DATED SEPTEMBER 25, 2014, (CN App #14-27)**

**Project Description:**

Seattle University is approved to establish a 36-bed Medicare and Medicaid certified nursing facility in Auburn within King County by converting 36 beds banked under the full facility closure provisions of Revised Code of Washington 70.38.115(13)(b). The 36 beds skilled nursing facility upon licensure would be managed by Wesley Homes under a management services agreement. Seattle University will be the initial licensee of the 36 bed facility

**Service Area**  
King County

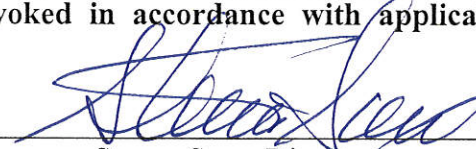
**Conditions:**  
See page #2

**Approved Capital Expenditure**

The approved capital expenditure associated with this project is \$10,020,000.

This Certificate authorizes commencement of the project from October 6, 2014 to October 6, 2016, unless extended, withdrawn, suspended, or revoked in accordance with applicable sections of the Certificate of Need law and regulations.

**Date Certificate Issued:** October 6, 2014

  
Steven Saxe, Director

**This Certificate is not transferable.**

**Certificate of Need #1534**

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**Conditions:**

1. Seattle University agrees with the project description as stated above. Seattle University further agrees that any change to the project as described in the project description is a new project that requires a new Certificate of Need.
2. Prior to providing services, Seattle University will provide copies of the listed adopted policies and agreements below for the department's review and approval.
  - Admission Agreement
  - Admission Policy
  - Grievance Policy
  - Updated Residents Handbook
  - Therapy services Agreement
  - Medical director credential number and Agreement

Copies of policies that have been adopted must be consistent with the draft policies provided in the application.

3. Seattle University will obtain Medicare and Medicaid provider numbers for Wesley Homes Lea Hill Health Center within 60 days of the licensure of the facility.
4. Wesley Homes Lea Hill Health Center must maintain its Medicare and Medicaid certification throughout the life of the facility, regardless of ownership.
5. Seattle University and any subsequent owners of the nursing home must not develop any policies or practices that discriminate against admission of patients based on payer source.